



ROSS MILLER  
Secretary of State  
204 North Carson Street, Suite 4  
Carson City, Nevada 89701-4520  
(775) 684 5708  
Website: [www.nvsos.gov](http://www.nvsos.gov)

## Articles of Association Cooperative Association

(PURSUANT TO NRS 81.170 - 81.270)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

<b>1. Name of Association:</b>				
<b>2. Registered Agent for Service of Process:</b> (check only one box)	<input type="checkbox"/> Commercial Registered Agent: <input type="text"/> Name <input type="checkbox"/> Noncommercial Registered Agent (name and address below) <b>OR</b> <input type="checkbox"/> Office or Position with Entity (name and address below) <input type="text"/> Name of Noncommercial Registered Agent <b>OR</b> Name of Title of Office or Other Position with Entity <input type="text"/> <input type="text"/> Nevada <input type="text"/> Street Address City Zip Code <input type="text"/> <input type="text"/> Nevada <input type="text"/> Mailing Address (if different from street address) City Zip Code			
<b>3. Term:</b> (may be perpetual)				
<b>4. Names and Addresses of the Board of Directors/Trustees:</b> (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than two directors/trustees)	1) <input type="text"/> Name <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Street Address City State Zip Code 2) <input type="text"/> Name <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Street Address City State Zip Code			
<b>5. Membership Fee:</b> (must be completed)	The membership fee is \$ <input type="text"/> per member. Each member signing the articles has paid the fee and their interests and rights are equal.			
<b>6. Purpose:</b> (required; continue on additional page if necessary)	The purpose of the corporation shall be: <input type="text"/>			
<b>7. Names, Addresses and Signatures of Subscribers:</b> (attach additional page if more than two subscribers; must be subscribed by the original associates or members)	<input type="text"/> <b>X</b> Name Subscriber Signature <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Address City State Zip Code <input type="text"/> <b>X</b> Name Subscriber Signature <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Address City State Zip Code			
<b>8. Certificate of Acceptance of Appointment of Registered Agent:</b>	I hereby accept appointment as Registered Agent for the above named Entity. <b>X</b> Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity <input type="text"/> Date <input type="text"/>			

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 81.170 Articles  
Revised: 10-16-09



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## Instructions for Cooperative Association

(PURSUANT TO NRS 81.170-81.270)

### **IMPORTANT: READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING FORM.**

1. **Name of the Association:** A name appearing to be that of a natural person and containing a given name or initials must not be used as a association name except with the addition of a corporate ending such as Incorporated, Inc., Limited, Ltd., Company, Co., Corporation, Corp. or other words that identifies it as not being a natural person. The name must be distinguishable from the names of corporations, limited-liability companies, limited partnerships, limited-liability limited partnerships, business trusts or limited-liability partnerships on file in the office of the Secretary of State. A name may be reserved, if available, for 90 days, by submitting a name reservation form with a \$25.00 filing fee.
2. **Registered Agent:** Persons wishing to incorporate in the State of Nevada must designate a person as a registered agent who resides or is located in this state. Every registered agent must have a street address in this state for the service of process, and may have a separate Nevada mailing address such as a post office box, which may be different from the street address.
3. Indicate the term for which the entity is to exist, which may be perpetual.
4. State the names and addresses of each member on the first governing board. Use a separate 8 ½ x 11 sheet as necessary for additional members. Directors or trustees must be at least 18 year of age.
5. Indicate the amount which each member is to pay upon admission as a fee for membership, and that each member signing the articles has actually paid the fee.
6. Describe the nature of business or purposes of the association.
7. Names and addresses of the original associates or members are required along with their signatures. An additional 8 ½ x 11 white sheet will be necessary if more than 2 subscribers.
8. Registered agent must complete and sign certificate of acceptance at bottom of form or attach a separate signed certificate of acceptance.
9. On a separate 8 ½ x 11, white sheet you may state additional information you wish to be part of the articles.

### **\*\*\*IMPORTANT\*\*\***

**INITIAL LIST OF OFFICERS:** Pursuant to NRS 78.150, each corporation organized under the laws of this state shall, on or before the last day of the first month after the filing of its articles of incorporation, and annually thereafter, file its list of officers, directors and registered agent. The fee is \$25.00 per year. Forms will be mailed to you upon the organization of your corporation and annually thereafter to the corporation's registered agent.

**COPIES:** One file stamped copy of the articles will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order. NRS 82.181 requires that a corporation receive at least one certified copy to be kept in the office of the registered agent. The Secretary of State keeps the original filing.

**CEREMONIAL CHARTER:** Ceremonial (colored) charters are also available for an additional \$100.00.

**FILING FEE:** Filing fee is \$50.00. Filing may be expedited for an additional \$125.00 expedite fee.

**TAX-EXEMPT STATUS:** Filing articles with the Secretary of State does not infer tax-exempt status. Prior to submitting articles of association, contact the IRS for specific information.

Filing may be submitted at the office of the Secretary of State or by mail at the following addresses:

**MAIN OFFICE:**  
***Regular and Expedited Filings***

Secretary of State  
New Filings Division  
204 North Carson Street, Suite 4  
Carson City NV 89701-4520  
Phone: 775-684-5708  
Fax: 775-684-7138

**SATELLITE OFFICE:**  
***Expedited Filings Only***

Secretary of State – Las Vegas  
Commercial Recordings Division  
555 East Washington Ave, Suite 5200  
Las Vegas NV 89101  
Phone: 702-486-2880  
Fax: 702-486-2888



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## Registered Agent Acceptance

(PURSUANT TO NRS 77.310)

This form may be submitted by: a Commercial Registered Agent, Noncommercial Registered Agent or Represented Entity. For more information please visit <http://www.nvsos.gov/business/forms/ra.asp>

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

### Certificate of Acceptance of Appointment by Registered Agent

In the matter of \_\_\_\_\_

Name of Represented Business Entity

I, \_\_\_\_\_ am a:

Name of Appointed Registered Agent OR Represented Entity Serving as Own Agent\*

(complete only one)

- a) ☐ commercial registered agent listed with the Nevada Secretary of State,  
b) ☐ noncommercial registered agent with the following address for service of process:

\_\_\_\_\_  
Street Address City Nevada Zip Code

\_\_\_\_\_  
Mailing Address (if different from street address) City Nevada Zip Code

- c) ☐ represented entity accepting own service of process at the following address:

\_\_\_\_\_  
Title of Office or Position of Person in Represented Entity

\_\_\_\_\_  
Street Address City Nevada Zip Code

\_\_\_\_\_  
Mailing Address (if different from street address) City Nevada Zip Code

and hereby state that on \_\_\_\_\_ I accepted the appointment as registered agent for  
the above named business entity. Date

**X**

Authorized Signature of R.A. or On Behalf of R.A. Company

\_\_\_\_\_

Date

\*If changing Registered Agent when reinstating, officer's signature required.

**X**

Signature of Officer

\_\_\_\_\_

Date



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## Customer Order Instructions

SUBMIT THIS COMPLETED FORM WITH YOUR FILING

USE BLACK INK ONLY - DO NOT HIGHLIGHT

Processing  
Service Requested:

☐

Regular

☐

24-Hour Expedite (additional fee included)

Name of Entity:

Date:

Return to:

Contact Name:

Phone:

**Return Delivery:** (email or fax options do not receive a copy via mail; must be ordered separately)

☐

Email to:

☐

Fax to:

☐

Hold for Pick Up

☐

Mail to Address Above

☐

FedEx: Acct #

☐

Other: (explain below)

Order Description: (include items being ordered and fee breakdown)\*

**\*PLEASE NOTE:** this office keeps the original paperwork. The first file stamped copy ordered at the time of filing is at no charge. Each additional copy is **\$2.00** per page (plus **\$30.00** for each certification).

Total Amount:

Method of Payment:

☐

Check/Money Order

☐

eCheck/Credit Card (attach checklist)

☐

Trust Account:

☐

Use balance remaining in job #



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## 1 or 2-Hour Expedite Customer Order Instructions

SUBMIT THIS COMPLETED FORM WITH YOUR FILING

USE BLACK INK ONLY - DO NOT HIGHLIGHT

Processing  
Service Requested:

☐

2-Hour Expedite  
(additional **\$500.00** fee included)

☐

1-Hour Expedite  
(additional **\$1000.00** fee included)

Name of Entity:

Date:

Return to:

Contact Name:

Phone:

**Return Delivery:**

☐

Email to:

☐

Fax to:

☐

Hold for Pick Up

☐

Mail to Address Above

☐

FedEx: Acct #

☐

Other: (explain below)

Order Description: (include items being ordered and fee breakdown)\*

**\*PLEASE NOTE:** this office keeps the original paperwork. The first file stamped copy ordered at the time of filing is at no charge. Each additional copy is **\$2.00** per page (plus **\$30.00** for each certification).

Total Amount:

Method of Payment:

☐

Check/Money Order

☐

eCheck/Credit Card (attach checklist)

☐

Trust Account:

☐

Use balance remaining in job #



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## **24-hour, 2-hour and 1-hour Expedite Service Guidelines**

***IMPORTANT: To ensure expedited service, please mark "Expedite" in a conspicuous place at the top of the service request. Please indicate method of delivery.***

### **24-HOUR EXPEDITE SERVICE**

The Secretary of State offers a 24-hour expedite service on most filings processed by this office. If you choose to utilize this service, please enclose with your filing the additional expedite fee. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Check the 24-hour expedite box on your customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 24-hour expedited service, include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made. This office *does not* fax confirmation of a 24-hour expedite.

The fee for 24-hour handling ranges from \$25.00 to \$125.00. Please consult our fee schedules for the appropriate 24-hour expedite fee. If you require assistance, please contact this office.

**Time Constraints:** Each filing submitted receives same day filing date and may be picked up within 24-hours. Filings to be mailed the next business day if received by 2:00 pm of receipt date and no later than the 2nd business day if received after 2:00 pm. Expedite period begins when filing or service request is received in this office in fileable form.

### **2-HOUR EXPEDITE SERVICE**

The Secretary of State offers a 2-hour expedite service on most filings processed by this office. If you choose to utilize the 2-hour expedite service, please enclose with your filing an additional \$500.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 2-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 2-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

### **1-HOUR EXPEDITE SERVICE**

The Secretary of State offers a 1-hour expedite service on most filings processed by this office. If you choose to utilize the 1-hour expedite service, please enclose with your filing an additional \$1000.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 1-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 1-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

**1-Hour and 2-Hour Time Constraints:** Each filing submitted for either 1-hour or 2-hour expedite receives same day filing date and will be acknowledged by fax or e-mail within expedite service time. Failure to indicate method of acknowledgement (fax or e-mail) or to provide a correct fax number or e-mail address may prevent the Secretary of State from acknowledging the filing of such documents. Filings may be picked up within the expedite service period. Filings to be mailed will be mailed out no later than the next business day following receipt. Expedite period begins when filing or service request is received in this office in fileable form.

**The Secretary of State reserves the right to extend the expedite period in times of extreme volume, staff shortages or equipment malfunction. These extensions are few and will rarely extend more than a few hours.**



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## ePayment Checklist (For Counter, Fax and Mail Requests)

Service Type: Counter ☐ Mail ☐ Fax ☐

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Order Processing Requested: (Expedite Processing Requires Additional Fees)  
Regular Processing ☐ 24-HOUR Expedite ☐ 2-HOUR Expedite ☐ 1-HOUR Expedite ☐

### **Payment by Electronic Check** (account holder name and address required below)

Account Type: ☐ Checking ☐ Savings  
Routing Number:   
Account Number:



Amount of Electronic Check: USD \$

### **Payment by Card** (card holder name and billing address required below)

Card Type: VISA ☐ MasterCard ☐ Discover ☐ American Express ☐

Customer Credit Card Number:   
V CODE\*

\* 3-digit number found on the far right of the backside of VISA, MasterCard and Discover cards  
4-digit number found on the front right side of American Express card.

**NOTICE:** For security and verification purposes, all credit card payments must include the 3 or 4-digit CVV2 code (VCode) number located on the credit card. Failure to include this code will result in the rejection of your filing or service request.

Credit Card Expiration Date: Month  Year

Amount to Charge Card: USD \$

### **Order Information** (required)

Entity Name/Order Reference:

#### Account/Card Holder Information:

Name as it Appears on the Account   
Billing Address   
City, State, Zip   
Telephone

### **Payment Authorization**

I authorize the Secretary of State to bill an amount not to exceed the following to be charged to the above listed account(s):

**X**  
\_\_\_\_\_  
Authorized Signature

Not to Exceed Amount: USD \$





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## Copies and Certification Services Fee Schedule Effective 7-1-08

The following is a list of copies and certification services and the associated fees. Fees are per document unless otherwise noted.

### **SERVICE REQUESTED:**

Copies	\$2.00 per page
Certification of Document	\$30.00
Search	\$50.00
Certificate of Existence (evidence of good standing – short form)	\$50.00
Certificate of Existence (listing amendments – long form)	\$50.00
Ceremonial Certificate of Good Standing	\$100.00
Certificate Evidencing Name Change	\$50.00
Certificate of Fact of Merger	\$50.00
Certificate of Default	\$50.00
Certificate of Revocation	\$50.00
Certificate of Dissolution	\$50.00
Certificate of Withdrawal	\$50.00
Certificate of Cancellation	\$50.00
Certificate of Non-Existence	\$50.00
Miscellaneous Certificates	\$50.00
Apostille (Hague Treaty Nations)/Certification (Non-Hague Treaty Nations)	\$20.00
Corporate Charter	\$50.00
Ceremonial Charter	\$100.00

### **EXPEDITE SERVICE:**

Expedite service is available for copies, certificate and certification services. Fees for expedite service are in addition to the fees as listed above.

#### **24 Hour Expedite Service: Order may be picked up or mailed out within 24-hours.**

Apostille	\$75.00
Copies: Per entity name	\$125.00
Certificates: Per entity name and certificate type	\$125.00
Search: Expedite fee on search only; additional expedite fee required for copies	\$125.00

#### **2-Hour Expedite Service: Order may be picked up or mailed within 2-hours.**

1 or more certificates (per entity name and certificate type)	\$500.00
1 or more copies (per entity name)	\$500.00

#### **1-Hour Expedite Service: Order may be picked up or mailed within 1-hour.**

1 or more certificates (per entity name and certificate type)	\$1000.00
1 or more copies (per entity name)	\$1000.00

### **BASIC INSTRUCTIONS:**

1. All orders may be submitted in writing, with fees enclosed, to the above address. Telephone orders with payment by VISA, Mastercard, Discover or American Express may be called into our Customer Service Department at (775) 684-5708. Trust account and credit card customers may fax expedite orders only to (775) 684-5645. Trust account orders must be received on company letterhead.
2. All orders not specified as a pick-up are mailed out via first-class mail, unless a Federal Express number is provided or other major courier pickup arrangement is made.
3. Fax back service is *only available* on 1-hour and 2-hour expedite orders for certificates or copies of 50 pages or less. This service must be requested at time of order with complete fax information provided.
4. Each order will be returned to one address only.





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## Nonprofit Corporation Fee Schedule Effective 7-1-08

**NONPROFIT CORPORATIONS FEES:** Pursuant to NRS 81, 82, 84 and 89. This includes Nonprofit Cooperative Corporations, Cooperative Associations, Nonprofit Cooperative Corporations without Stock, Nonprofit Corporations, Corporation Sole and Professional Association.

Articles of Incorporation pursuant to NRS 81.010 (Nonprofit Cooperative Corp. with stock)*	\$50.00*
Articles of Incorporation pursuant to NRS 81.170 (Cooperative Associations)	\$50.00
Articles of Incorporation pursuant to NRS 81.410 (Nonprofit Cooperative Corp without stock)	\$50.00
Articles of Incorporation pursuant to NRS 82.006 (Nonprofit Corporation)	\$50.00
Articles of Incorporation pursuant to NRS 84.010 (Corporation Sole)	\$50.00
Articles of Conversion; Articles of Domestication - contact office for fee information	
Revival of Nonprofit Entity – contact office for fee information	
Reinstatement Fee	\$100.00
Certificate of Amendment	\$50.00
Restated Articles	\$50.00
Certificate of Correction	\$25.00
Termination Pursuant to NRS 92A	\$350.00
Merger	\$350.00
Preclearance of any Document	\$125.00
Dissolution of Corporation	\$50.00
Ceremonial Charter	\$100.00
Certificate of Good Standing	\$50.00
Ceremonial Certificate of Good Standing	\$100.00
Initial List of Officers and Directors	\$25.00
Annual or Amended List of Officers and Directors	\$25.00
<b>24-Hour Expedite fee for above filings</b>	<b>\$125.00</b>
Apostille	\$20.00
<b>24-Hour Expedite fee for above filing</b>	<b>\$75.00</b>
Name Reservation (Online Name Reservation \$75.00 – includes expedite fee)	\$25.00
<b>24-Hour Expedite fee for above filing</b>	<b>\$50.00</b>
Change of Noncommercial Registered Agent	\$60.00
Change of Registered Agent by Represented Entity	\$60.00
Resignation of Director or Officer	\$75.00
Resignation of Registered Agent (plus \$1.00 for each additional entity listed)	\$100.00
<b>24-Hour Expedite fee for above filings</b>	<b>\$25.00</b>
Certification of Documents – per certification	\$30.00
Copies – per page	\$2.00
Late Fee for List of Officers	\$50.00

\*Fee will be higher if corporation elects to authorize stock. Fees will be figured according to the initial filing fee schedule for profit corporations.

**2-Hour Expedite is available on all of the above filings at the fee of \$500.00 per item.**

**1-Hour Expedite is available on all of the above filings at the fee of \$1000.00 per item.**

*PLEASE NOTE: the expedite fee is in addition to the standard filing fee charged on each filing and/or order.*

### **24-HOUR EXPEDITE TIME CONSTRAINTS:**

Each filing submitted receives same day filing date and may be picked up within 24 hours. Filings to be mailed the next business day if received by 2:00 pm of receipt date and no later than the 2nd business day if received after 2:00 pm. Expedite period begins when filing or service request is received in this office in fileable form. The Secretary of State reserves the right to extend the expedite period in times of extreme volume, staff shortages, or equipment malfunction. These extensions are few and will rarely extend more than a few hours.